## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
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maintenance fee notification	IS.						
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22913 75	90 05/09/2006			nave its own certificate of maining of transmission.			
				Co	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope		
WORKMAN NYDEGGER				I hereby certify that			
(F/K/A WORKMAN NYDEGGER & SEELEY)				addressed to the Ma	ail Stop ISSUE FEE address PTO (571) 273-2885, on the o	above, or being facsimile	
60 EAST SOUTH TEMPLE				transmitted to the US	PTO (571) 273-2885, on the o	late indicated below.	
1000 EAGLE GATE TOWER SALT LAKE CITY, UT 84111					(Depositor's name)		
						(Signature) (Date)	
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
	,						
10/014,679	/014,679 12/11/2001 Jeffrey D. W		alker	15436.247.45.1	3207		
					CTOR OPTICAL AMPLIFIE		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$0	\$1400	08/09/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
HELLNER, MARK		3663		359-3 44000			
1. Change of correspondence	ee Address" (37	2. For printing	on the patent front page,	list			
CFR 1.363).			(1) the names of up to 3 registered patent attorneys 1 WORKMAN NYDEGGER				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,				
				(2) the name of a single firm (having as a member a 2			
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT (p	rint or type)			
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appear I a substitute for	on the patent. If an assig filing an assignment.	gnee is identified below, the c	locument has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY an					COUNTRY)		
Finisar Corporation			Sunnyvale, California				
Please check the appropriate	assignee category or catego	ries (will not be pr	inted on the pater	nt): 🗆 Individual 🖔	Corporation or other private gr	oup entity Government	
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Issue Fee			A check in the amount of the fee(s) is enclosed.				
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Authorized Signature	comment			DateA	ugust 9, 2006		
Typed or printed name _	Eric L. Masc	hoff		Registration	No. 36,596	<del></del>	
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